## 2016 · 04 · 29 · 08 · 00072101

FEC FORM 3X

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## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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**FEC FORM 3X** 

Rev. 12/2004

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| 1.   | COMMIT  | TEE (in full)  | TIPE ON I   | PNINT V                              |                            | the lines.            | oing, type                             | 12FF            | 4M5                        |                    |  |
|--|---|--|---|--------------------------------------|----------------------------|-----------------------|--|-----------------|----------------------------|--------------------|--|
| Εl   | A <sub>I</sub> S <sub>I</sub> T <sub>I</sub>        | FIRINI WIAIS   | SIHILINI  | GITIOINI                             | ICIOIMIM                   |                       | IEIEI IFI                              | OIRI IF         | PIRIOIGIRI                 | FISIS              |  |
|  |   |  |   |                                      |                            |                       |  |                 |                            |                    |  |
| ADI  | DRESS (n  | RESS (number and street)                                   |   | 13(211)                              |                            |                       |  |                 |                            |                    |  |
| <b>V</b>   | Check if different than previously reported. (ACC)  |  |   |                                      | 1111                       | 4.1.1.                |  |                 |                            |                    |  |
| <u>_</u>   |   |  | VIAIL 4 EI YI FOIRIDI 1 1 1 1 1 WIA 91910136 - 01321/ |                                      |                            |                       |  |                 |                            |                    |  |
| 2. FEC IDENTIFICATION NU   |   |  | JMBER ▼   |                                      | CITY ▲                     |                       |  | STATE A         | •                          | ZIP COL            | DE 🛦   |
|  | C٥  | 0,5,8,2,2,   | 7,0   | 3                                    | . IS THIS<br>REPORT        | $\overline{X}$        | NEW<br>(N) OR                          | 0               | AMENDED<br>(A)             |                    |  |
| 4.   | TYPE OF REPORT (Choose One)  (a) Quarterly Reports: |  | (b) Mor<br>Rep<br>Due                                 |                                      | Feb 20 (M2)<br>Mar 20 (M3) | 0                     | May 20 (M5                             | 5=3<br>2=9      | Aug 20 (M8)<br>Sep 20 (M9) |                    | Nov 20 (M11)<br>(Non-Election<br>Year Only)<br>Dec 20 (M12)<br>(Non-Election |
|  |   |  | 21)   |                                      | Apr 20 (M4)                |                       | Jul 20 (M7)                            |                 | Oct 20 (M10)               | Pares .            | Year Only) Jan 31 (YE)   |
|  |   |  | 2) (c)  | 12-Day PRE-Election Report for th    |                            | Primary (1 Convention |  | ( <del></del> ) | neral (12G)<br>ecial (12S) | Ц                  | Runoff (12R)   |
|  |   | Quarterly Report (C<br>January 31<br>Year-End Report (Y    |   | EI                                   | ection on                  |                       | <u>′ [] ′</u>                          |                 |                            | in the<br>State of |  |
|  |   | July 31 Mid-Year<br>Report (Non-electio<br>Year Only) (MY) | n (d)   | 30-Day  POST-Election Report for the | <u>;</u>                   | General (3            | 10G)                                   | Ru              | noff (30R)                 |                    | Special (30S)  |
|  |   | Termination Report<br>(TER)                                |   | ·                                    | ection on                  | M                     | / <b></b> /                            |                 |                            | in the<br>State of |  |
| 5. Covering Period OI OI 2016 through O5 OI 2016   |   |  |   |                                      |                            |                       |  |                 |                            |                    |  |
|  |   | I have examined the Name of Treasure                       |   |                                      |                            | _                     | d belief it is                         | true, corre     | ct and comple              | te.                |  |
| . 71-  |   | Traine or moudific   |   | L <u>ruign</u>                       | <u>VI 503</u>              |                       | ······································ |                 |                            |                    |  |
| Type or Print Name of Treasurer <u>Carolyn Cress</u> Signature of Treasurer <u>Oarolyn Cress</u> Date 04 25 2016 |   |  |   |                                      |                            |                       |  |                 |                            |                    |  |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.